

## **APPLICATION FOR RENEWAL OF TRADE NAME REGISTRATION**

Wyoming Secretary of State  
The Capitol Building, Room 110  
200 W. 24th Street  
Cheyenne, WY 82002-0020

Phone (307) 777-7311/7312  
Fax (307) 777-5339  
E-mail: corporations@state.wy.us

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1. Trade name to be renewed: \_\_\_\_\_

\_\_\_\_\_

2. BE IT KNOWN THAT THE APPLICANT \_\_\_\_\_ has hereto adopted and used  
a certain trade name and hereby makes application for the renewal of such trade name registration.

3. Business address of applicant: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mailing address of applicant (if different from business address): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Is applicant ☐ (a) an individual ☐ (b) corporation? ☐ (c) limited partnership?  
☐ (d) general partnership? ☐ (e) statutory trust? ☐ (f) unincorporated association?  
☐ (g) limited liability company? ☐ (h) other? (Check one)

If (c) (d) (e) or (g) list names and addresses of partners, general partners, trustees, members or managers  
(attach separate sheet if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If (b) (c) (e) or (g) list state of incorporation or organization: \_\_\_\_\_

If (h), explain: \_\_\_\_\_

5. Describe the general nature of business conducted by applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Date of initial registration: \_\_\_\_\_

APPLICANT CERTIFIES THAT THE TRADE NAME IS STILL IN USE IN WYOMING.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Applicant(s)

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State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me by \_\_\_\_\_  
\_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Witness my hand and official seal.

(SEAL)

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Filing fee: **\$50.00**